

STATE OF MISSISSIPPI
COUNTY OF PIKE

84183

AFFIDAVIT OF HEIRSHIP
of
EMMA LEE BENTZ
A/K/A EMMA ELIZABETH BENTZ
AND
LAWRENCE WILLIAM BENTZ, JR.TRACT 1:

Starting at the iron stake which marks the corner of Sections 11, 12, 13 and 14, Township 1 North, Range 7 East, Pike County, Mississippi, and running North 1200 feet to point of beginning; run thence West 150 feet; thence North 250 feet; thence East 150 feet; thence South 250 feet to point of beginning; making a tract of land 150 feet by 250 feet, all in the East Half of the Southeast Quarter of Section 11, Township 1 North, Range 7 East, Pike County, Mississippi.

TRACT 2:

That part of the West side of the W $\frac{1}{2}$ of the SW $\frac{1}{4}$ of Section 12, Township 1 North, Range 7 East, Pike County, Mississippi, described as follows: Begin at a stake on Section line of Section 12, located on the West side of the Osyka-Magnolia Highway, at the North side of the bridge which is just North of the Convent or the property of St. Mary of the Pines, and run in an Easterly direction along the North side of the branch 662 feet; thence run in a Northerly direction 218 feet to the lands of Henry Scott; thence run in a Northwesterly direction 728 feet to West side of Osyka-Magnolia highway, joining line Section 12, thence along the West side of said Highway and in a southerly direction 662 feet to point of beginning.

TRACT 3:

A parcel of land situated in the Western edge of the Southwest Quarter (SW $\frac{1}{4}$) of the Southeast Quarter (SE $\frac{1}{4}$) of Section 11, Township 1, Range 7 East, and more particularly described as follows: Beginning at a stake 330 feet North of the Southwest corner of Southeast Quarter, Section 11, Township 1, Range 7 East, running from thence North 175 feet to a stake, thence East 190 feet, more or less, to the Tangipahoa River, thence, South along the wanderings and meanderings of the said Tangipahoa River 175 feet, more or less, thence West 190 feet, more or less, to the point of beginning.

ALSO, that parcel of land lying and situated East of the right of way of the Illinois Central Railroad described as follows: Beginning at the Southwest corner of the Southwest Quarter of the Southeast Quarter of Section 11, Township 1 North, Range 7 East, and run thence North 330 feet, more or less to the point of beginning; run thence West 26 feet, more or less, to the right of way of the Illinois Central Railroad; run thence North 175 feet; run thence East 26 feet more or less; run thence South 175 feet to the point of beginning; and being a strip of land 26 feet East and West by 175 feet North and South in the SW $\frac{1}{4}$ of the SW $\frac{1}{4}$ of Section 11, Township 1 North, Range 7 East, Pike County, Mississippi.

INDEXING INSTRUCTIONS:

Index in the E $\frac{1}{2}$ of SE $\frac{1}{4}$, the SE $\frac{1}{4}$ of SW $\frac{1}{4}$ and SW $\frac{1}{4}$ of SE $\frac{1}{4}$ of Section 11, Township 1 North, Range 7 East, Pike County, Mississippi,
and
Index in the W $\frac{1}{2}$ of the SW $\frac{1}{4}$ of Section 12, Township 1 North, Range 7 East, Pike County, Mississippi.

Print Address

249 Louisiana Avenue
McComb, Mississippi 39648

*G. Terrell Morgan**Attorney at Law*

601-684-4841

Fax: 601-684-4876

Mailing Address

Post Office Box 1344

McComb, Mississippi 39648

PERSONALLY APPEARED BEFORE ME, the undersigned Notary Public in and for the State and County aforesaid, the undersigned, HARRY FRERICHS, JR. and KLIS NORMAND VIELEE, adults, who, after being duly sworn on their respective oaths, state:

1. That they were personally acquainted with and knew EMMA LEE BENTZ a/k/a EMMA ELIZABETH BENTZ and her son LAWRENCE WILLIAM BENTZ, JR. during their lifetimes, and that they are well acquainted with the family and near relatives of both decedents and with all those who would under the laws of the State of Mississippi be their heirs, and that the following statements are true and correct based upon the personal knowledge of the affiants.

2. That EMMA LEE BENTZ a/k/a EMMA ELIZABETH BENTZ departed this life intestate on March 26, 1983, while she was a resident of Los Angeles, California.

3. That EMMA LEE BENTZ a/k/a EMMA ELIZABETH BENTZ was married once, and then to LAWRENCE WILLIAM BENTZ, SR., and that LAWRENCE WILLIAM BENTZ, SR. died on April 11, 1973.

4. That five children were born unto Emma Lee Bentz a/k/a Emma Elizabeth Bentz, i.e.
A CHILD WHO DIED AS AN INFANT
LAWRENCE WILLIAM BENTZ, JR.
MARTIN P. BENTZ
MARGARET BENTZ BURR
CHARLES A. BENTZ

5. That at the time of her death on March 26, 1983, EMMA LEE BENTZ a/k/a EMMA ELIZABETH BENTZ left as her only heirs at law, four children, i.e.

LAWRENCE WILLIAM BENTZ, JR..
MARTIN P. BENTZ
MARGARET BENTZ BURR
CHARLES A. BENTZ

6. That subsequent to the death of Emma Lee Bentz a/k/a Emma Elizabeth Bentz, her son, LAWRENCE WILLIAM BENTZ, JR. died on January 17, 1995, at the age of 74 years, while a resident of LaPlace, Louisiana.

7. That LAWRENCE WILLIAM BENTZ, JR. had been predeceased by his wife, Kathleen Pick Bentz who died on April 23, 1987.

8. That one child was born unto LAWRENCE WILLIAM BENTZ, JR., i.e. SANDRA BENTZ who is now known as SANDRA BENTZ WILLIAMS.

9. That at the time of his death on January 17, 1995, LAWRENCE WILLIAM BENTZ, JR. left as his only heir at law his daughter, SANDRA BENTZ WILLIAMS.

WITNESS OUR SIGNATURES, on this, the 18th day of May 1995.

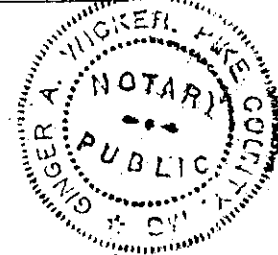
HARRY FRERICHS, JR.
HARRY FRERICHS, JR.

KLIS NORMAND VIELEE
KLIS NORMAND VIELEE

SWORN TO AND SUBSCRIBED BEFORE ME, on this, the 18th day of May 1995.

Ginger A. Wicker
NOTARY PUBLIC

My Commission Expires: 10-18-98



Grant Address

249 Louisiana Avenue
McComb, Mississippi 39648

G. Terrell Morgan
Attorney at Law

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Fax: 601-684-4876

Mailing Address

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STATE OF MISSISSIPPI
COUNTY OF PIKE

PERSONALLY APPEARED BEFORE the undersigned authority in and for the State and County aforesaid, HARRY FRERICHs, JR. and KLIS NORMAND VIELEE of lawful age, being first duly sworn, upon their oaths state: that the information given in the above and foregoing affidavit is true and correct to their personal knowledge.

Harry Frerichs Jr.
HARRY FRERICHs, JR.

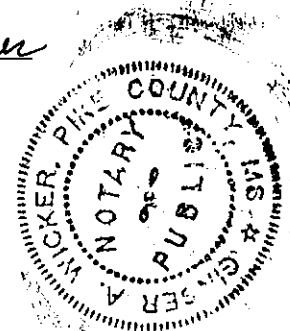
Klis Normand Vielee
KLIS NORMAND VIELEE

SWORN TO AND SUBSCRIBED BEFORE ME, on this, the 18th day of May 1995.

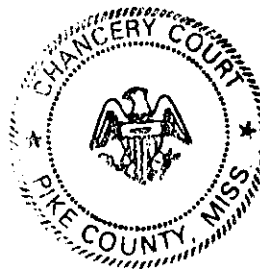
Ginger A. Wicker
NOTARY PUBLIC

My Commission Expires:

10-18-98



Prepared by:
G. TERRELL MORGAN
Attorney at Law
P.O. Box 1344
249 Louisiana Avenue
McComb, Mississippi 39648
(601) 684-4841
MS State Bar No. 3475



STATE OF MISSISSIPPI
PIKE COUNTY
I CERTIFY THIS INSTRUMENT
WAS FILED IN RECORD
95 JUN 20 AM 11:43
J. R. R. R.
NOTARY PUBLIC

Great Abstracts
249 Louisiana Avenue
McComb, Mississippi 39648

G. Terrell Morgan
Attorney at Law
601-684-4841
Fax: 601-684-4876

Mailing Abstracts
Post Office Box 1344
McComb, Mississippi 39648

LOCAL FILE
NUMBER

STATE FILE
NUMBER

DECEASED—NAME		FIRST	MIDDLE	LAST	SEX	DATE OF DEATH (MONTH, DAY, YEAR)	
1. MR. LAWRENCE WILLIAM BENTZ, SR.					MALE	APRIL 11 th , 1973	
RACE WHITE, NEGRO, AMERICAN INDIAN, ETC. (SPECIFY)		AGE—LAST BIRTHDAY (YEARS)		UNDER 1 YEAR	UNDER 1 DAY	DATE OF BIRTH (MONTH, DAY, YEAR)	COUNTY OF DEATH
4. WHITE		76		MO. DAYS	HOURS MIN.	12-24-1896	PIKE
CITY, TOWN, OR LOCATION OF DEATH		INSIDE CITY LIMITS (SPECIFY YES OR NO)		HOSPITAL OR OTHER INSTITUTION—NAME (IF NOT IN EITHER, GIVE STREET AND NUMBER)			
7. MAGNOLIA		7. YES		7. BEACHAM'S MEMORIAL HOSP.			
STATE OF BIRTH (IF NOT IN U.S.A., NAME COUNTRY)		CITIZEN OF WHAT COUNTRY		MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (SPECIFY)		SURVIVING SPOUSE (IF WIFE, GIVE MAIDEN NAME)	
8. MISSISSIPPI		U. S. A.		10. MARRIED		11. MRS. EMMA LEE MARTIN (Bentz)	
SOCIAL SECURITY NUMBER		USUAL OCCUPATION (GIVE KIND OF WORK DONE DURING MOST OF WORKING LIFE, EVEN IF RETIRED)		KIND OF BUSINESS OR INDUSTRY			
12. 427-10-6298		13. POSTMASTER & MERCHANT		13b. POST OFFICE & MERCHANT			
RESIDENCE—STATE		COUNTY	CITY, TOWN, OR LOCATION		INSIDE CITY LIMITS (SPECIFY YES OR NO)		STREET AND NUMBER
14. MISS.		14b. PIKE	14c. CHATAWA		14d. NO		14e.
FATHER—NAME		FIRST	MIDDLE	LAST	MOTHER—MAIDEN NAME		
15. MR. JOHN L. BENTZ					15. NELLIE WARD (Bentz)		
INFORMANT—NAME				MAKING ADDRESS			
17. MRS. LAWRENCE WILLIAM BENTZ				17b. CHATAWA, MISSISSIPPI			
PART I. DEATH WAS CAUSED BY:		ENTER ONLY ONE CAUSE PER LINE FOR (a), (b), AND (c)					APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH
18. IMMEDIATE CAUSE		18. Acute granulocytic leukemia					6 mos.
CONDITIONS, IF ANY, WHICH GAVE RISE TO IMMEDIATE CAUSE (a), STATING THE UNDERLYING CAUSE LAST		(a) DUE TO OR AS A CONSEQUENCE OF:					
		(b) DUE TO, OR AS A CONSEQUENCE OF:					
		(c)					
PART II. OTHER SIGNIFICANT CONDITIONS: CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO CAUSE GIVEN IN PART I (a)						AUTOPSY (YES OR NO)	IF YES WERE FINDINGS CONSIDERED IN DETERMINING CAUSE OF DEATH
						19. NO	19b.
ACCIDENT, SUICIDE, HOMICIDE, OR UNDETERMINED (SPECIFY)		DATE OF INJURY (MONTH, DAY, YEAR)		HOUR	HOW INJURY OCCURRED (ENTER NATURE OF INJURY IN PART I OR PART II, ITEM 18)		
20. 20b.		20b.		20c.	20c.		
INJURY AT WORK (SPECIFY YES OR NO)		PLACE OF INJURY AT HOME, FARM, STREET, FACTORY, OFFICE BLDG., ETC. (SPECIFY)		LOCATION		(STREET OR R.F.D. NO., CITY OR TOWN, STATE)	
20. 20f.		20f.		20g.		20g.	
CERTIFICATION—PHYSICIAN:		MONTH	DAY	YEAR	MONTH	DAY	YEAR
21. DECEASED FROM		4	9	73	21b. 4	11	73
CERTIFICATION—MEDICAL EXAMINER OR CORONER: ON THE BASIS OF THE EXAMINATION OF THE BODY AND/OR OF THE INVESTIGATION, IN MY OPINION, DEATH OCCURRED ON THE DATE AND DUE TO THE CAUSE(S) STATED.		HOUR OF DEATH		THE DECEDENT WAS PRONOUNCED DEAD		DATE SIG'LED (MONTH, DAY, YEAR)	
22. 22b.		22b.		22c.		22d.	
CERTIFIER—NAME (TYPE OR PRINT)		SIGNATURE		OFFICE OR TITLE		DATE SIG'LED (MONTH, DAY, YEAR)	
23. W. A. HART, M.D.		23b. W. A. Hart		23c. M.D.		23d. 4/11/73	
MAILING ADDRESS—CERTIFIER		CITY OR TOWN		STATE		ZIP	
23. 23d.		23d.		23e.		23e.	
BURIAL, CREMATION, REMOVAL (SPECIFY)		CEMETERY OR CREMATORY—NAME		LOCATION		CITY OR TOWN	
24. BURIAL		24. CHATAWA CEMETERY		24. CHATAWA, MISSISSIPPI		24.	
DATE (MONTH, DAY, YEAR)		FUNERAL HOME—NAME AND ADDRESS		STREET OR R.F.D. NO., CITY OR TOWN, STATE, ZIP			
24. 4-14-1973		25. HARTMAN FUNERAL HOME, P.O. BOX 824, McCOMB, MISS-39648		25.		25.	
EMBALMENT (SPECIFY)		No.		REGISTRAR—SIGNATURE		DATE RECEIVED BY LOCAL REGISTRAR	
26. 26b.		26b.		26c.		26c.	

CERTIFICATE OF DEATH
STATE OF CALIFORNIA

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LOCAL REGISTRATION DISTRICT AND CERTIFICATE NUMBER

1. NAME OF DECEDENT—FIRST Emma		1B. MIDDLE Elizabeth		1C. LAST Bentz		2A. DATE OF DEATH (MONTH, DAY, YEAR) March 26, 1983		2B. HOUR 2359	
3. SEX Female		4. RACE White		5. ETHNICITY		6. DATE OF BIRTH October 29, 1900		7. AGE 82 YEARS	
8. BIRTHPLACE OF DECEDENT (STATE OR FOREIGN COUNTRY) MS		9. NAME AND BIRTHPLACE OF FATHER Charles A. Martin - MS				10. BIRTH NAME AND BIRTHPLACE OF MOTHER Emma G. Adam - MS			
11. CITIZEN OF WHAT COUNTRY U. S. A.		12. SOCIAL SECURITY NUMBER 426-88-3103		13. MARITAL STATUS Widowed		14. NAME OF SURVIVING SPOUSE (IF WIFE, ENTER BIRTH NAME)			
15. PRIMARY OCCUPATION Housewife		16. NUMBER OF YEARS THIS OCCUPATION 62		17. EMPLOYER (IF SELF-EMPLOYED, SO STATE) Self		18. KIND OF INDUSTRY OR BUSINESS Own Home			
19A. USUAL RESIDENCE—STREET ADDRESS (STREET AND NUMBER OR LOCATION) 15080 E. Danbrook Drive				19B.		19C. CITY OR TOWN Whittier			
19D. COUNTY Los Angeles				19E. STATE CA		20. NAME AND ADDRESS OF INFORMANT—RELATIONSHIP Martin P. Bentz 15080 E. Danbrook Drive Whittier, CA. 90604			
21A. PLACE OF DEATH Whittier Medical Center		21B. COUNTY Los Angeles		21C. STREET ADDRESS (STREET AND NUMBER OR LOCATION) 15151 Janine Drive		21D. CITY OR TOWN Whittier		21E. STATE CA	
22. DEATH WAS CAUSED BY: IMMEDIATE CAUSE (A) Arteriosclerotic Cardiovascular Disease DUE TO, OR AS A CONSEQUENCE OF (B) DUE TO, OR AS A CONSEQUENCE OF (C)		23. OTHER CONDITIONS CONTRIBUTING BUT NOT RELATED TO THE IMMEDIATE CAUSE OF DEATH		24. WAS DEATH REPORTED TO CORONER? 82-3941		25. WAS BIOPSY PERFORMED? 16		26. WAS AUTOPSY PERFORMED? 16	
27. WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEMS 22 OR 23? DATE 16				28. PHYSICIAN—SIGNATURE AND DEGREE OR TITLE G. C. Lien Deputy Coroner					
29. SPECIFY ACCIDENT, SUICIDE, ETC.				30. PLACE OF INJURY		31. INJURY AT WORK		32A. DATE OF INJURY—MONTH, DAY, YEAR	
33. LOCATION (STREET AND NUMBER OR LOCATION AND CITY OR TOWN)				34. DESCRIBE HOW INJURY OCCURRED (EVENTS WHICH RESULTED IN INJURY)					
35A. I CERTIFY THAT DEATH OCCURRED AT THE HOUR, DATE AND PLACE STATED FROM THE CAUSES STATED. AS REQUIRED BY LAW I HAVE HELD AN INVESTIGATION				35B. CORONER—SIGNATURE AND DEGREE OR TITLE G. C. Lien Deputy Coroner				35C. DATE SIGNED 3/28/83	
36. DISPOSITION Burial		37. DATE—MONTH, DAY, YEAR March 29, 1983		38. NAME AND ADDRESS OF CEMETERY OR CREMATORY St. Mary of the Pines, Chatawa, MS		39. EXAMINER'S LICENSE NUMBER 4634		40. DATE ACCEPTED BY LOCAL REGISTRAR MAR 28 1983	
41. LOCAL REGISTRAR—SIGNATURE White-Emerson Mortuary F-217				42. DATE ACCEPTED BY LOCAL REGISTRAR		43. STATE REGISTRAR—SIGNATURE			

VS-11 (10-78)

01-3-3-0863

THIS IS A TRUE CERTIFIED COPY OF THE RECORD
FILED IN THE COUNTY OF LOS ANGELES DEPARTMENT
OF HEALTH SERVICES IN 7 SEARS TWO SEAL IN
PURPLE INK.



MAR 26 1983

Director of Health Services and Registrar